	0	RDER FOR SU	JPPLIES OR SE	RVICES				PAGE	OF	PAGES	
	Mark all packages			order numbe	ers.						
DATE OF ORDER     ORDER NO.			,	6. SHIP TO: a. NAME OF CONSIGNEE							
5. ISSUING OFFICE (Address correspondence to)				b. STREET ADDRESS							
	7	TO:		c. CITY d. STATE e. ZIP CODE							
a. NAME OF CONT		10.		f. SHIP VIA							
b. COMPANY NAME				8. TYPE OF ORDER							
c. STREET ADDRESS				a. PURCHASE  b. DELIVERY Except for billing instructions on the reverse, this delivery conductions of the reverse, the delivery conductions of the instructions of the instruction of the instr							
d. CITY   e. STATE   f. ZIP CODE				REFERENCE YOUR:  Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.  REFERENCE YOUR:  order is subject to instructions contain on this side only of this form and issued subject to the terms a conditions of the above-numbers contract.							
9. ACCOUNTING A	AND APPROPRIATION	DATA		10. REQUISITI	ONING OFF	FICE					
11. BUSINESS CLA	ASSIFICATION (Check	appropriate box(es)) b. OTHER THAN SM	IALI	c. DISADVAN	TAGED	į	l 4 WC	OMEN-OWNED			
12. F.O.B. POINT			14. GOVERNMENT B/I					6. DISCOUNT	TERMS		
a. INSPECTION	13. PLACE OF b. ACCEPT	FANCE									
		17 SUPPLIES OR	. SCHEDULE (See	e reverse for	QUANTIT	Υ	UNIT			QUANTITY	
ITEM NO. (a)			ORDERE (c)	D UNIT	PRICE (e)	AMOU (f)	AMOUNT ACCEPTED  (f) (g)				
	18. SHIPPING POINT		19. GROSS SHIPPIN	G WEIGHT	20. INVOI	CE NO.					
SEE BILLING INSTRUCTIONS ON REVERSE		DE TO:				_		17(h) TOT. (Cont.			
	a. NAME	.L. 10.						pages)			
	b. STREET ADDRESS c. CITY	(or P.O. Box)	d. STATE e. ZIP CODE						17(i) GRAND TOTAL		
22. UNITED S	TATESOF ABY (Signature)	<b></b>				23. NAME <i>(</i> 7		ACTING/ORDE	DING 5	FFIOFO	

provided th \$ N be provided and extend (except for	e following to other in the contraction of the cont	ng statement, (signe voice will be submitte t number (if any), or Prepaid shipping co st), the billing must	d and dated) is on ed." However, if the der number, item nur ests will be indicated	Contractor (or attache Contractor mber(s), des as a separ ill of lading	as the Contr d to) the ord wishes to sub- cription of su- ate item on tor receipt. W	actor's invoice, instead of the control of the cont	ted in the amount of wing information must quantities, unit prices ing costs exceed \$10			
	<b>3</b>	3 (1)	·	IVINGREPO	_					
			nn on the face of this low have been reject	s order has	peen: insp	<del></del>	received by me			
SHIPMENT		Tact. Items listed be	DATE RECEIVED			ORIZED U.S. GOV'T REP.	DATE			
NUMBER			DATE TIESELVES	DATE						
TOTAL CONTAINERS GROSS WEIGHT RECEIVED AT TITLE						<u> </u>				
			REPORT	OF REJEC	TIONS					
ITEM NO.		SUPPLIES OR S	SERVICES	UNIT	QUANTITY REJECTED	REASON FOR REJECTION				